## **AUCTIONEERS & AUCTION HOUSE INFORMATION SHEET**

<u>License required</u> --- It shall be unlawful for any person, firm or corporation to conduct an auction in the city or to do business as an auctioneer without having first obtained a license as is herein required and paying the fee herein set forth.

Fees --- Auction house transient traders and transient auctioneers:

One	month.	 				.\$100.00
six	months	 				.\$300.00
One	year	 				.\$500.00

Provided, however, that auction houses dealing solely with the sale of second hand used furniture, second hand used household goods and appliances and other used second hand merchandise shall pay an annual fee of \$50.00. Auctioneers for sale of animals, second hand goods and real estate, the fee for one year shall be \$35.00. Auction House and Auctioneers license are issued on a fiscal year. (May 1<sup>st</sup>through April 30<sup>th</sup>)

Requirements: Fill out application and personally bring to the City Clerk's office with picture ID. Signature will be required in front of City Clerk or her designee. Once accepted by City Clerk or her designee, the application is sent to the Quincy Police Department for a background check. Upon approval from the Police Department, the City Clerk or her designee will call applicant at which time they or a designee can pick up the Auctioneer's License. Must have State of Illinois Auction License Number on application before issuance of license by City Clerk or her designee.

## APPLICATION FOR AUCTIONEER LICENSE City Of Quincy

Name of applicant (Print) _							
Date of Birth//	(first)	(init	ial)		(last)		
Home address of applicant					_ Phone # _		
	(street)	(city)	(state)		<del>-</del>		
Business address					_ Phone #		
(street) Nature/Purpose of License	(city)	(state)		(zip)			
State Auction License Num	ber		. ,				
Date(s)			Time(s)				
Corporation (if applicable) State where incorporated		Do	to \$==00===	- anatad			
State where incorporated		Dat	te incorp	oratea			
President of Corporation Home address				Date	of birth _ Phone#	/	/_
Vice-President of Corporate Home address	ion			Date	of birth _ _Phone#	/	/_
Secretary of Corporation Home address							
Home address					_Phone#		
Treasurer of Corporation _				Date	of birth_	/	/_
Home address					_Phone#		
If partnership-name of part Home address					of birth _Phone#	_/	/
Name of Manager of Busine Home address	ess	,		Date	of birth _Phone#	/	/
Has applicant, manager, of (Circle) YES NO	any other of	ficial(s) of this	s corpor	ation been	convicted (	of felon	y?
If yes, indicate where arrest	ted and list t	he offense(s)co	ommitte	d			
Do you agree to observe all (Circle) YES NO	laws of the S	state of Illinoi	s and or	dinances of	the City o	f Quinc	y:
Is applicant, manager, and/reputation? (Circle) YI		nbers of the i	ndicated	l corporatio	n, of good	charac	ter or
Signature				Date			
Remarks							
		FFICE USE					
Approved	Dis	sapproved			_ Date		
City Clerk			Date	<b>.</b>			